PTO/SB/05 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or bocket Number 96		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY	
FOR NUMBER FILED			FILED	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC	FEE						s	OR		5770.60
TOTAL	R 1,16(a)) . CLAIMS	10	/ () minus 20 =			x s=		OR	x s=	
INDEP	R 1.16(c)) ENDENT CLAIMS		3_minus 3 =		0	x s=		OR	x s=	
	(3) (3) (4 (3)					+ 5 =		OR	+ 5 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	77010)
* If the						, , , ,		_	•	
	CL	AIMS AS AME	NDED -	PART II				00	OTHER	THAN
	(Column 1) (Column 2) (Column 3)				SMALL E	NTITY	OR T	SMALL	1	
ENT A	78/11	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	AMENTALINI	Minus	- 20	= 0	x s=		OR	x \$=	i
END	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	- '-	Minus	2	= 2	x s=		OR	x s=	400.00
AME	1	ATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1,16(d))	+ s=		OR	+s=	
	FIRST PRESENT	ATION OF MOETH CE				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	400.61
		(Column 1)		(Column 2)	(Column 3)			_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x s=		OR	x s=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x s=		OR	x s=	ļ
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				R 1.16(d))	+ \$=	İ	OR	+ s=	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		,
ENT C		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total	AMENDMENT	Minus	**	=	x s=		OR	x \$=	
AMENDM	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	-	Minus	•••	=	x s=		OR	x s=	
\ ME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 5 =		OR	+ \$=		
\vdash	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (STOCK I, 1964)				TOTAL ADD'L FEE	1	OR	TOTAL ADD'L FEE		

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter 32.

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, use of the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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